

DEPARTMENT OF THE ARMY

OFFICE OF THE SURGEON GENERAL 5109 LEESBURG PIKE FALLS CHURCH, VA 22041-3258

DASG-IMD 16 November 2004

AHLTA SOP #6 Creating System Change Requests

- 1. PURPOSE: To establish policy for direct submission of System Change Requests (SCRs) through AMEDD channels, and to increase visibility of the SCR process.
- 2. REFERENCE: N/A
- 3. SCOPE: This SOP applies to all AMEDD users and MTFs.

4. DEFINITIONS:

- A. System Change Request A written request to change, enhance, add, or remove features in AHLTA. These changes could alter function, adjust workflow, or correct software issues.
- B. Trouble Ticket The method by which issues with AHLTA are raised for review. These issues are often identified while using AHLTA and may include concerns with software function or errors.
- 5. There are two SCR processes:
 - A. Trouble ticket process. This is the current process. Any user who has identified a concern informs the Help Desk (Tier 0 support). If the concern cannot be addressed locally, it is elevated and the issue may become an SCR. This may occur when user, clinic, or MTF knows they want to request a system enhancement, but the process may lead to lack of clarity regarding the actual desired outcome.
 - B. AMEDD SCR Form (new process). This process should only be used when the user knows they are requesting a system change or enhancement that is *not* patient- or time-critical. The trouble ticket process should be used for those occurrences. Keep in mind that a non-critical SCR can take up to 18 months for implementation, if the recommended change is accepted after Tri-Service review. The AMEDD SCR process is as follows:
 - 1) User/clinic/MTF decides on desired system change.
 - 2) User reviews SCR list at the AHLTA AKO Community webpage to determine if a similar SCR has already been submitted.
 - 3) User completes SCR Form (attached), including as much detail as possible or desired outcome.

- 4) The form is emailed to david.freeman@se.amedd.army.mil or faxed to 706-787-4778.
- 5) AHLTA office reviews form and seeks clarification as needed.
- 6) SCR is posted to the AKO site for tracking.
- 7) SCR is forwarded to CITPO Program Office for Tri-Service review.
- 8) AHLTA Program Office tracks and posts updates to status on the AKO site.
- 9) Note: Whenever possible, similar SCR or those which lead to the same desired outcome will be combined.
- 6. The goals of this program are:
 - A. Provide improved awareness of desired AHLTA enhancements.
 - B. Expedite the review process.
 - C. Provide for AMEDD-wide awareness and tracking of SCR.
- 7. Proponent for this SOP is the Program Office Director at Commercial 706-787-7165 or DSN 773-7165.

RON MOODY, MD
Program Director
AMEDD AHLTA Implementation
and Clinical Integration Office

AHLTA SYSTEM CHANGE REQUEST



Name:
Contact Email:
Location/Site:
Alternate POC:
Build/Version OF AHLTA:
Rate this SCR on a scale of 1-10: 1 – Nice to have 5 – Important improvement to care or efficiency 10 – Significantly needed change for patient care or efficiency
SCR Description (What problem(s) will this SCR resolve or what area/outcome of healthcare delivery will be improved?):
Briefly describe (if applicable) how this SCR will be used in normal clinical care:
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Differly describe (if applicable) flow this SCR will be used in normal chilical care.

Notes:

- 1. Your assistance in helping to improve AHLTA is greatly appreciated. Please forward this form to the contact listed below. If you can include screen shots, that would be very helpful.
- 2. Please note that SCRs are reviewed at a TRISERVICE level. This SCR and others of a similar nature may be combined into a single unified SCR.
- 3. If further information is needed you will be contacted.
- 4. A list of known AMEDD SCR is posted on the AHLTA AKO site, www.us.army.mil, Groups, AHLTA

CONTACT INFORMATION: Fax to 706-787-4778 or Email to David.Freeman@se.amedd.army.mil Mr. Freeman is the assistant to the AMEDD AHLTA Program Manager.